MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

SERIAL NO. APPLICANT(S) FILING DATE

CLAIMS

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CLAIMS		40° 0'00	49	0.7		****
		NAME OF PERSONS				

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

FORM PTO-1360 (REV. 3-78)

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